



**Executive Office of Elder Affairs**

## **State Innovation Model Grant (SIM-Grant)**

### **Stakeholder Meeting**

# **Update on Community Links Portal**

Monday, September 29, 2014

2:00PM - 3:30PM

One Ashburton Place  
Video Conference Room, 10th Floor  
Boston, MA

# Agenda

## Project Context

- Current EOEI sub-projects under SIM-Grant
- SIMS – Senior Information Management System

## What is Community Links Portal (CLP)?

- Vision: Bridging the gap & changing perspectives
- Patient information visible on portal
- Administration & Consent

## CLP Demonstration

## Implementation & Challenges

- Pilot Group
- Matching Patients to Consumers
- Standardization & Promotion

## Lessons Learned (so far...)

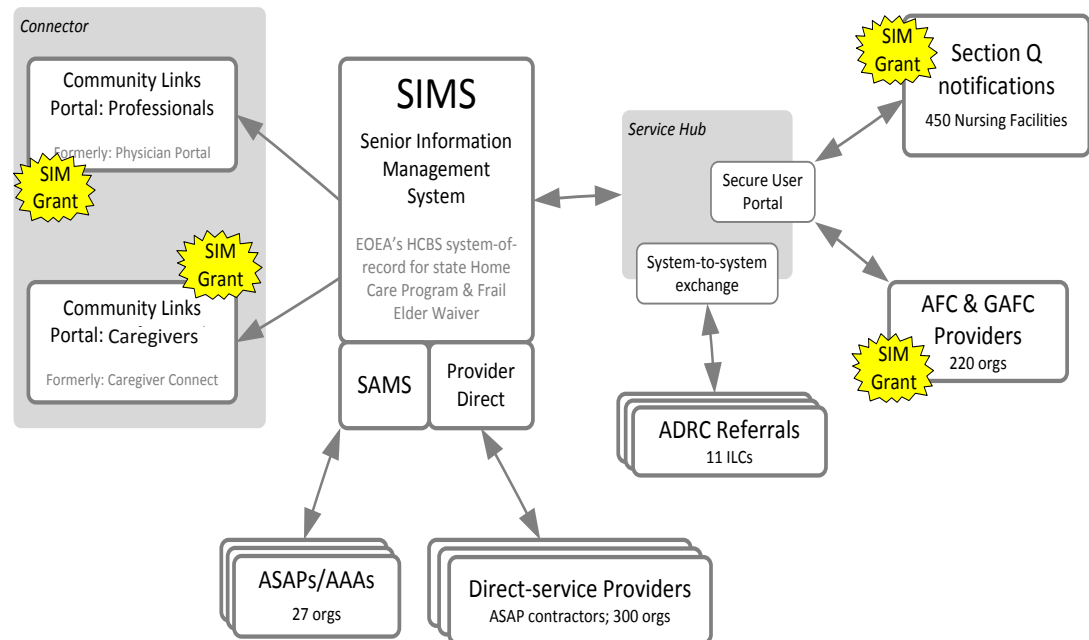
## Current Project Status

## Questions?



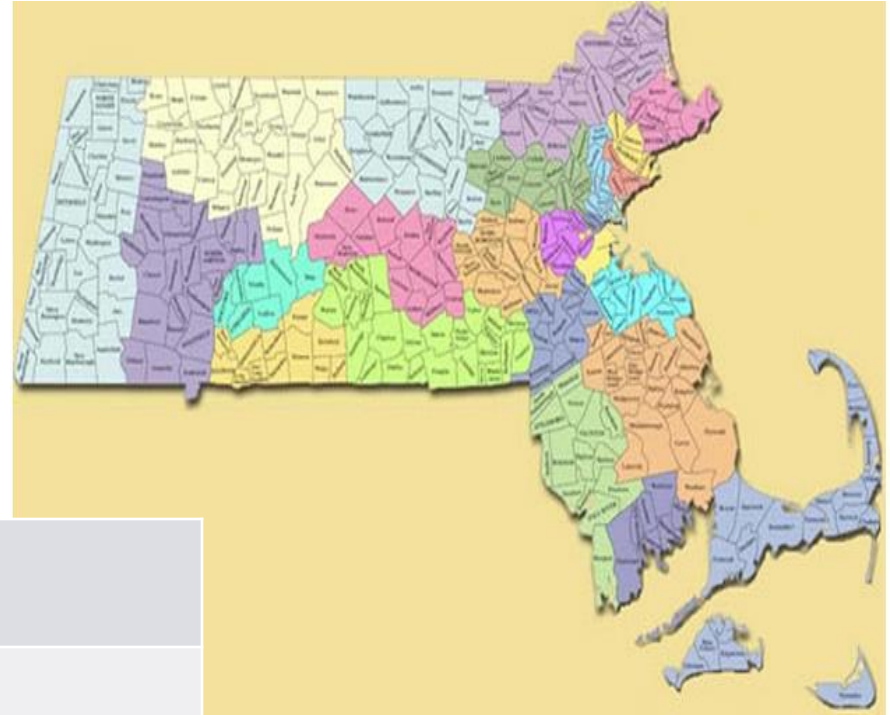
# Four (4) EOEA projects under SIM-Grant

- AGD – AFC/GAFC Determination Streamline
- Section-Q Reporter
- Community Links Portal
  - Professionals
  - Caregivers



# SIMS (Senior Information Management System)

- Statewide consumer database
- Administered centrally
  - Standardized data
- Managed locally by ASAPs



27	Aging Services Access Points	(ASAPs)
2,900	SIMS users: Case Managers, RNs	(5,500 total active users)

42,000	Active Home Care consumers	Average per month, active state/Waiver programs
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# What is the Community Links Portal?

## Vision: Bridging the gap & changing perspectives

- HCOs have limited knowledge of ASAP system & function
- Value of ASAP comprehensive data source
- CLP was ASAP group initiative (Mass Home Care)

## Patient Information Visible on Portal

- Based on regular Home Visits (180 days or less)
- Consumer information, including informal supports
- Service Plan
- Clinical information: self-reported meds, ADLs & IADLs
- High-quality documentation, with interdisciplinary case review at ASAP



# What is the Community Links Portal?

## Administration & Consent

- ASAPs – easy data update to make patient info (in)visible
- Light support burden
  - Easy for ASAP to add org
  - User management is delegated to Health Care Organization
- CM gathers consent, updates record to make it visible in CLP
- New standardized protocol: Informed consent forms updated for all home-care



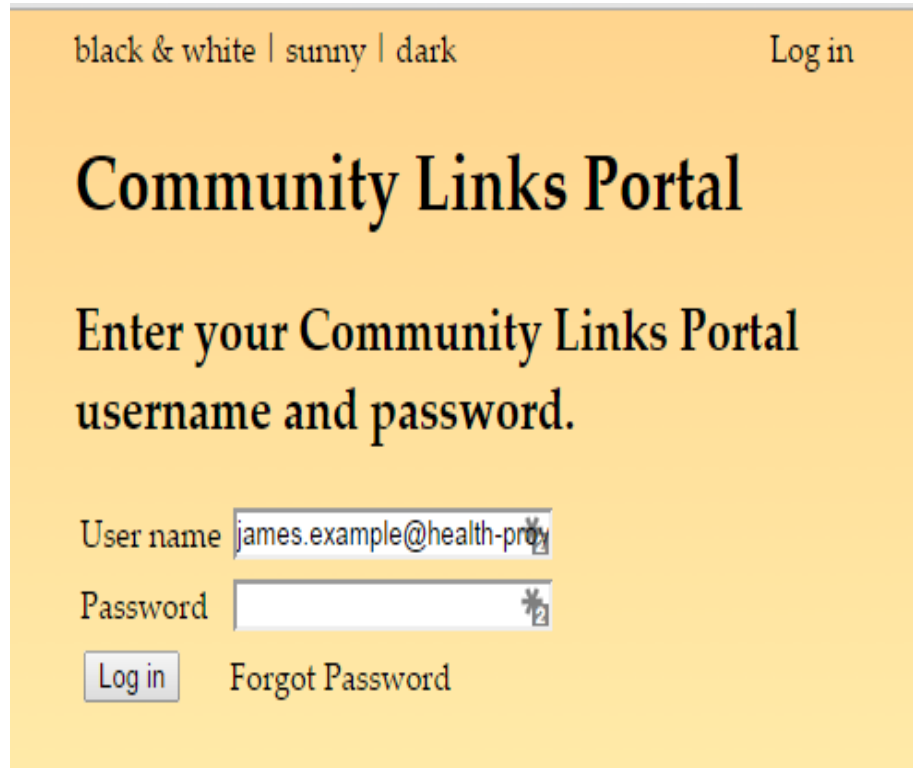
Web Consent Received?	<input checked="" type="checkbox"/>
Web Consent Start Date	9/29/2014 <input type="button" value="grid"/>
Web Consent End Date	<input type="text" value="Enter date"/> <input type="button" value="grid"/>



# **CLP Demonstration**



# Community Links Portal: Screenshot #1



black & white | sunny | dark Log in

## Community Links Portal

Enter your Community Links Portal username and password.

User name

Password

[Forgot Password](#)

## Screenshots of the Community Links Portal

- Left-hand: full frame view of the portal (7 total)
- Right-hand side: same screen, cropped & zoomed to better show content of interest





# Community Links Portal: Screenshot #2

The screenshot shows a web browser window with the address bar displaying 'community-links-portal.mass-elders.com/sample/abate-sam.htm'. The page has a navigation bar with links: 'black & white | sunny | dark', 'Consumer List | Manage Users | My Account | Log out'. The main header reads 'Community Links Portal - James Example' and 'Xample Healthcare, Inc.'. Below this is a summary box for 'Abate, Sam' with contact information and a 'DOB: 10/30/1926 (87)'. A 'Current Services' section lists various care services with unit counts. An 'Assessment Date: 9/10/2014' is noted, followed by a 'Comments' section containing a detailed home visit report.

Community Links Portal - James Example  
Xample Healthcare, Inc.

Abate, Sam  
119 Westwood Road, Peabody, 01960  
(445) 950-4785  
DOB: 10/30/1926 (87)

Primary Care Manager: Laura Teckman (CM)  
Default Agency: North Shore Elder Services, Inc.  
Agency Phone: (978) 750-4540

**Current Services**

Personal Emergency Response Sys (Monthly) - 1 unit (Unit Type = Month) monthly  
Homemaker - 8.00 units (Unit Type = 15 Minutes) weekly (Fri: 8.00)  
HDM Meal Lunch Weekday Hot - 3.00 units (Unit Type = Meal) weekly (Mon: 1.00 Wed: 1.00 Fri: 1.00)

**Assessment Date: 9/10/2014**

**Comments**

Cm conducted an annual home visit with clt and dil on 3/10/14. Clt was appropriately dressed and groomed and her home was neat and clean. All necessary paperwork was signed and completed. Public benefits were discussed. Clts fuel assistance application was sent in by SIL. She stated that while they did not receive an approval letter it appears as though they were approved as she has a \$1000 credit on her gas bill. CM called fuel assistance and spoke to a representative who stated that the application was received but has not been processed yet. CM relayed this information to Sandi and suggested that she contact the Gas Company in regards to the credit.

Clt denies any recent falls or hospitalizations. Clt reports that her appetite is good and she sleeps well. Clts last visit with her PCP, Dr. Ford, was at the end of the summer and has another scheduled for some time in January. Sandi reported that the elder will be going back to her former PCP, Dr. Butcher, Dr. Ford, at the end of the year. Clt is currently on a list to see Dr. Ford.

## Xample Healthcare, Inc.

**Abate, Sam**

119 Westwood Road, Peabody, 01960  
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Cm conducted an annual home visit with clt and dil on 3/10/14. Clt was appropriately dressed and groomed and her home was neat and clean. All necessary paperwork was signed and completed. Public benefits were discussed. Clts fuel assistance application was sent in by SIL. She stated that while they did not receive an approval letter it appears as though they were approved as she has a \$1000 credit on her gas bill. CM called fuel assistance and spoke to a representative who stated that the application was received but has not been processed yet. CM relayed this information to Sandi and suggested that she contact the Gas Company in regards to the credit.



# Community Links Portal: Screenshot #3

Community Links Portal x

community-links-portal.mass-elders.com/sample/abate-sam.htm

provides and enter with a homemaker who assists in many of these areas. The client's financial support system, which continues to be strong, assist in all other areas including some shopping, transportation, escort, financial and medication management.

Clt currently receives 12 units of home making provided by Independence. Clt stated that she does not feel comfortable with the homemaker that is currently providing service for her. The clt and dil requested a new worker. CM called John who found a new worker, named Alexa, who can provide service for the clt on the same day and time, Weds mornings. Clt also receives 4 units of cab rides monthly provided by Yellow Cab, as well as a PERS, 1 unit monthly, provided by Lifeline which is now paid for by Mass Health. Clt denies the need from additional services at this time. CSP remains appropriate. Next home visit will be 6/14.

Memory Loss Screen <i>Score=0, 1, or 2 possible impairment; 3, 4, or 5 suggests no impairment</i>	Physical Findings
Indicate the date of the Memory Loss Screen 03/10/2014	Estimated Height 59 inches
Indicate the score of the Memory Loss Screen 3	Estimated Weight 142 lbs.
Indicate the reason for the Memory Loss Screen Annual	
Responsibility / Advanced Directives	Pain
Client has a legal guardian Yes	Frequency with which client complains or shows evidence of pain Pain daily
Legal Guardian's Name Paul Abate	Intensity of pain Moderate
	From client's point of view, pain intensity disrupts usual activities Yes
Visits in Last 90 Days or Since Last Assessment	Character of pain
Number of times ADMITTED TO HOSPITAL with an overnight stay 1	Localized - single site
	From the client's point of view, medications adequately control pain No pain

can provide service for the clt on the same day and time, Weds mornings. Clt also receive of cab rides monthly provided by Yellow Cab, as well as a PERS, 1 unit monthly, provide Lifeline which is now paid for by Mass Health. Clt denies the need from additional service time. CSP remains appropriate. Next home visit will be 6/14.

## Memory Loss Screen *Score=0, 1, or 2 possible impairment; 3, 4, or 5 suggests no impairment*

Indicate the date of the Memory Loss Screen 03/10/2014

Indicate the score of the Memory Loss Screen 3

Indicate the reason for the Memory Loss Screen Annual

## Responsibility / Advanced Directives

Client has a legal guardian Yes

Legal Guardian's Name Paul Abate

## Visits in Last 90 Days or Since Last Assessment

## Physical Findings

Estimated Height 59 inch

Estimated Weight 142 lb

## Pain

Frequency with which client complains or shows evidence of pain Pain daily

Intensity of pain Moderate

From client's point of view, pain intensity disrupts usual activities Yes

Character of pain Localized - single site



# Community Links Portal: Screenshot #4

Community Links Portal x

community-links-portal.mass-elders.com/sample/abate-sam.htm

### Self-Reported Medications

PERFORMANCE CODE - MANAGING MEDICATIONS-How medications are managed (e.g., remembering to take medicines, opening bottles, taking correct drug dosages, giving injections, applying ointments) Done with help some of the time

DIFFICULTY CODE - MANAGING MEDICATIONS-How medications are managed (e.g., remembering to take medications, opening bottles, taking correct drug dosages, giving injections, applying ointments) Some difficulty

Name	Dosage	Form (Route of Administration)	Frequency	Taken as needed (PRN)	Comments
Calcium	600 Milligram (mg)	by mouth (PO)	(BID) twice daily (every 12 hours)	No	supplement
Bayer	81 Milligram (mg)	by mouth (PO)	(PRN) as necessary	No	pain, blood thinner
Fosamax	70 Milligram (mg)	by mouth (PO)	(QD or HS) once daily	No	osteoporosis
Acetomenaphen	325 Milligram (mg)	by mouth (PO)	(PRN) as necessary	No	pain

### Self-Reported Medications

PERFORMANCE CODE - MANAGING MEDICATIONS-How medications are managed (e.g., remembering to take medicines, opening bottles, taking correct drug dosages, giving injections, applying ointments) Done with help some of the time

DIFFICULTY CODE - MANAGING MEDICATIONS-How medications are managed (e.g., remembering to take medications, opening bottles, taking correct drug dosages, giving injections, applying ointments) Some difficulty

Name	Dosage	Form (Route of Administration)	Frequency	Taken as needed (PRN)	Comments
Calcium	600 Milligram (mg)	by mouth (PO)	(BID) twice daily (every 12 hours)	No	suppl
	81				



# Community Links Portal: Screenshot #5

Community Links Portal x

community-links-portal.mass-elders.com/sample/abate-sam.htm

Mood and Behavior Patterns	Home Environment - Living Space Hazards
A FEELING OF SADNESS OR BEING DEPRESSED-that life is not worth living, that is not worth living, that nothing matters, that he or she is of no use to anyone or would rather be dead	Heating or cooling problems Flooring or carpeting problems
PERSISTENT ANGER WITH SELF OR OTHERS-e.g., easily annoyed, anger at care received	Informal Support Services
EXPRESSIONS OF WHAT APPEAR TO BE UNREALISTIC FEARS-e.g., fear of being abandoned, left alone, being with others	Primary Helper Abate, Gladys
REPETITIVE HEALTH COMPLAINTS-e.g., persistently seeks medical attention, obsessive concern with body functions	Lives with client Yes
REPETITIVE ANXIOUS COMPLAINTS, CONCERNS--e.g., persistently seeks attention/reassurance regarding schedules, meals, laundry, clothing, relationship issues	Relationship to client Spouse
SAD, PAINED, WORRIED FACIAL EXPRESSIONS-e.g., furrowed brows	If needed, willingness (with ability) to increase help with advice or emotional support No
RECURRENT	If needed, willingness (with ability) to increase help with ADL care More than 2 hours per day

## Mood and Behavior Patterns

A FEELING OF SADNESS OR BEING DEPRESSED-that life is not worth living, that nothing matters, that he or she is of no use to anyone or would rather be dead

PERSISTENT ANGER WITH SELF OR OTHERS-e.g., easily annoyed, anger at care received

EXPRESSIONS OF WHAT APPEAR TO BE UNREALISTIC FEARS-e.g., fear of being abandoned, left alone, being with others

REPETITIVE HEALTH COMPLAINTS-e.g.,

## Home Environment - Living Space Hazards

Heating or cooling problems  
Flooring or carpeting problems

## Informal Support Services

Primary Helper Abate, Gladys

Lives with client Yes

Relationship to client Spouse

If needed, willingness (with ability) to increase help with advice or emotional support No

If needed, willingness (with ability) to increase help with ADL care More than 2 hours per day



# Community Links Portal: Screenshot #6

Community Links Portal x

community-links-portal.mass-elders.com/sample/abate-sam.htm

**IADL (Instrumental Activities of Daily Living)**

Performance Code, difficulty, who helps, device needed, type of device or mode (when indicated)

Meal preparation  
Done with help all of the time, Some difficulty

Housework, Ordinary  
Needs assistance most of the time, Great difficulty

Housework, Heavy  
Does with maximum help

Manage finances  
Needs assistance sometimes, Some difficulty

Telephone use  
Independent, No difficulty

Shopping  
Done with help all of the time, Great difficulty

Transportation use  
Done with help all of the time, Great difficulty

**ADL (Activity of Daily Living)**

Performance, difficulty, who helps, device needed, type of assistance / device / appliances/ medical equipment

Mobility in bed  
Independent

Transfer in/out of bed/chair  
INDEPENDENT - but experiences difficulty

Locomotion in home  
Uses device

Locomotion outside of home  
Limited assistance

independent, no difficulty

Shopping

Done with help all of the time, Great difficulty

Transportation use

Done with help all of the time, Great difficulty

**ADL (Activity of Daily Living)**

Performance, difficulty, who helps, device needed  
medical equipment

Mobility in bed

Independent

Transfer in/out of bed/chair

INDEPENDENT - but experiences difficulty

Locomotion in home

Uses device

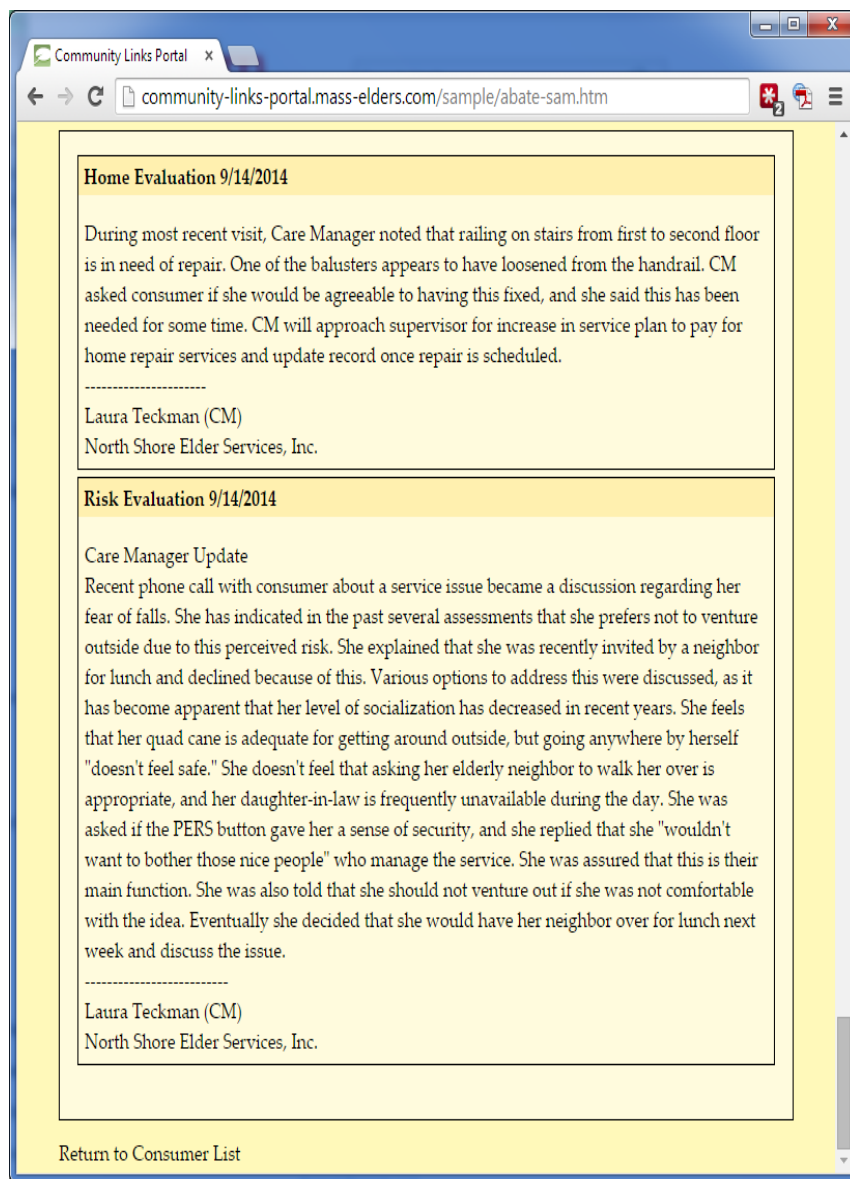
Locomotion outside of home

Limited assistance





# Community Links Portal: Screenshot #7



# Implementation & Challenges

ASAP initiates contact -> Signed Organizational Agreement -> Submits to EOEa

## Pilot Group

- 10 signed organizational agreements
- Varied group of HCO types & plans for usage
- Implementation pace dictated by partners (with EOEa's encouragement)

## Matching Patients and Consumers

- Challenge #1 – no quick and easy method
- ASAPs can initiate process with database reports
- Small starter group / Initial larger batch / ongoing process

## Standardization & Promotion

- Evolving “Quick Start” implementation
- ASAPs must see benefit outweighing effort (project lead, gathering consent..)
- Existing relationships key



# Lessons Learned (so far...)

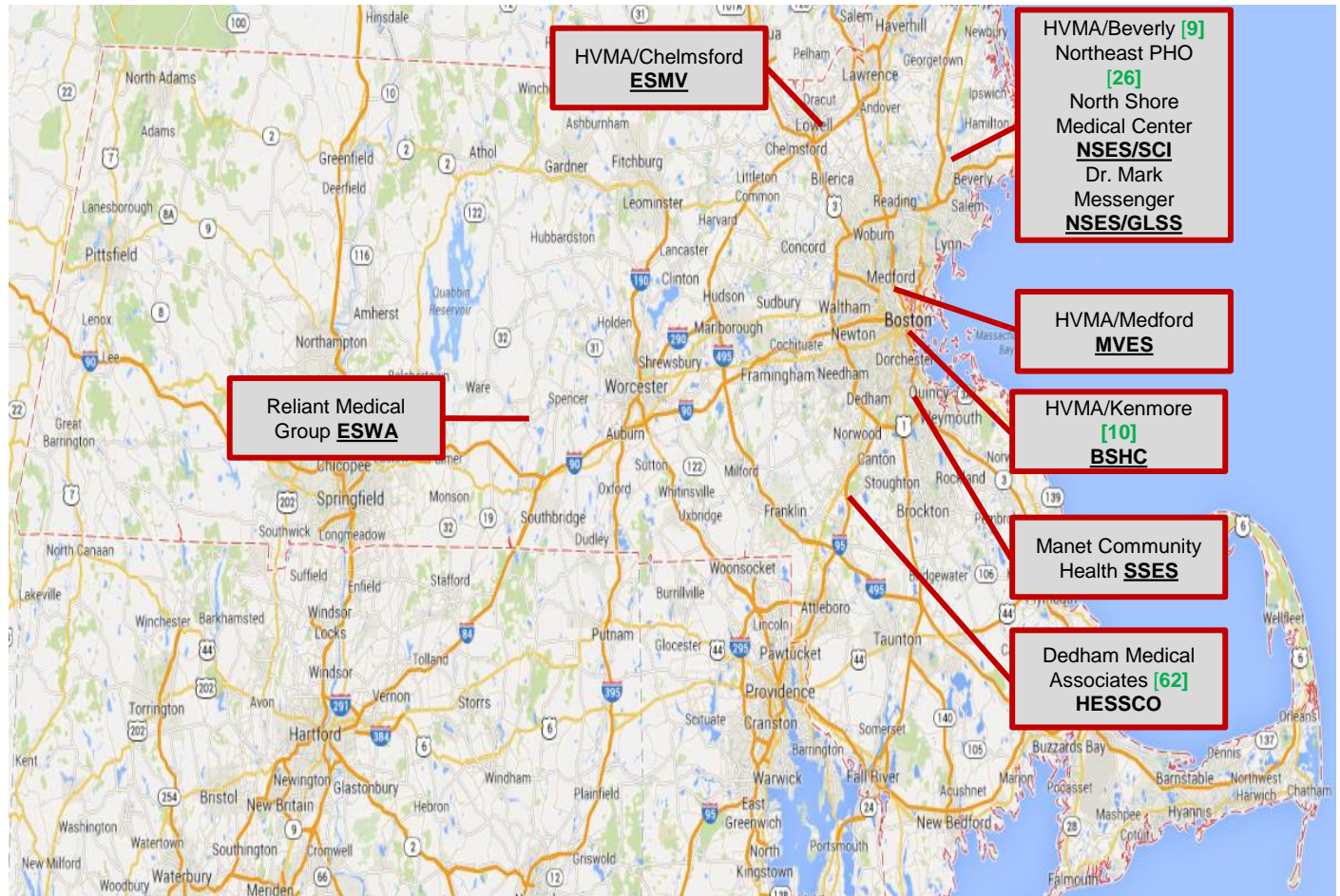
- CLP – Health Care Organization Types:
  - Standard Physician’s Practice
  - Community Health Centers
  - Large Providers with Multiple Sites
  - Hospitals
- CLP – Different Applications:
  - “Standard” Use – Physician’s Office
  - CCTP Tool (Boston Senior Home Care)
  - New Program Initiative (Elder Services of Worcester)
- Feedback
  - Recognized as high value information
  - HCOs love up to date service data!
  - Dedham Medical Associates:
    - CLP part of routine roster reviews (standard operations) with MDs, SWs
    - Nursing Managers use CLP information to supplement phone contact with ASAP





# Current Project Status

## 10 Signed Partnerships (ASAP – HCO)



# Questions?

## Thanks!

### Contacts

EOEA Project Leads:

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Andy Grigorov

[Andy.Grigorov@state.ma.us](mailto:Andy.Grigorov@state.ma.us)

